

COMPLAINT

COMPLAINANT'S

NAME _____ ADDRESS _____ PHONE# _____

ADDRESS OR LOCATION OF PROBLEM _____

NATURE OF
PROBLEM

HOW LONG HAS THIS PROBLEM EXISTED? _____

HAS THE OWNER/AGENT BEEN NOTIFIED? _____ DATE NOTIFIED _____

IN PERSON _____ IN WRITING _____ BY PHONE _____

SIGNATURE: _____

COMPLAINT RECEIVED

BY _____ DATE _____ TIME _____

Housing & Neighborhood Development

OWNER'S NAME _____ ADDRESS _____

HOUSING CODE FILE EXISTS _____ YES _____ NO CITY LIMITS / 2 MILE FRINGE

NEIGHBORHOOD COMPLIANCE OFFICER _____

COMMENTS _____

